

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

HORN, KHALAF, ABUZIR,  
MITCHELL & SCHMIDT  
2 N. LaSalle Street, Suite 630  
Chicago, IL 60602

Talapatibauer Monammy

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature  <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee </p> <p>B. Received by (Printed Name) <u>MAY 12 2008</u>  <input type="checkbox"/> V.C. Date of Delivery </p>
<p>1. Article Addressed to</p> <p style="font-size: 1.2em;">Michael Cherot  Office of General Counsel  U.S. Dept. of Homeland Security  Washington DC.  20528</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>2. Article Number</p> <p style="font-size: 1.2em;">7001 0360 0000 4307 8278</p> <p>(Transfer from service label)</p>	<p>3. Service Type</p> <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Certified Mail  <input type="checkbox"/> Registered  <input type="checkbox"/> Insured Mail </div> <div> <input checked="" type="checkbox"/> Express Mail  <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> C.O.D. </div> </div> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>